


NPDES PERMITTEE DATA REPORT FORM

|   |   |   |                 |     |    |                                |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |   |    |    |    |    |    |    |    |    |    |    |
|---|---|---|-----------------|-----|----|--------------------------------|---|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|---|----|----|----|----|----|----|----|----|----|----|
|    | <b>United States Environmental Protection Agency</b><br><b>Laboratory DMR-QA Evaluation Study 24</b><br><b>Laboratory Performance Evaluation</b><br>(These data are collected under the authority of<br>the Federal Water Pollution Control Act.) | <b>EPA USE ONLY</b><br><br><table border="1" style="margin-left: auto; margin-right: auto;"> <tr> <td>N</td> <td>1</td> </tr> <tr> <td>1</td> <td>2</td> </tr> </table> | N               | 1   | 1  | 2                              | <b>NPDES Permit Number</b><br><br><table border="1" style="margin-left: auto; margin-right: auto;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td>3</td><td>4</td><td>5</td><td>6</td><td>7</td><td>8</td><td>9</td><td>10</td><td>11</td><td></td><td></td> </tr> </table> |    |    |    |    |    |    |    |    |    |    |    | 3  | 4  | 5  | 6  | 7  | 8  | 9  | 10 | 11 |    |    | <b>Permit Extension</b><br><br><table border="1" style="margin-left: auto; margin-right: auto;"> <tr> <td></td><td></td> </tr> <tr> <td>12</td><td>13</td> </tr> </table> |    |    | 12 | 13 |    |    |    |    |    |    |
|   | N   | 1   |                 |     |    |                                |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |   |    |    |    |    |    |    |    |    |    |    |
| 1   | 2   |   |                 |     |    |                                |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |   |    |    |    |    |    |    |    |    |    |    |
|   |   |   |                 |     |    |                                |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |   |    |    |    |    |    |    |    |    |    |    |
| 3   | 4   | 5   | 6               | 7   | 8  | 9                              | 10  | 11 |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |   |    |    |    |    |    |    |    |    |    |    |
|   |   |   |                 |     |    |                                |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |   |    |    |    |    |    |    |    |    |    |    |
| 12  | 13  |   |                 |     |    |                                |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |   |    |    |    |    |    |    |    |    |    |    |
| <b>Current Permittee Mailing Address</b><br><br><div style="display: flex; justify-content: space-between;"> <span>NPDES Permit Number:</span> <span>Phone:</span> </div> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <b>ATTENTION:</b><br/>           Follow the checklist on next page for instructions on completing this form and submitting data for evaluation.         </div>   |   |   |                 |     |    |                                |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |   |    |    |    |    |    |    |    |    |    |    |
| <b>Enter Permittee Name as it Should Appear in Report Heading:</b><br><table border="1" style="width: 100%; height: 40px;"> <tr> <td>14</td><td>15</td><td>16</td><td>17</td><td>18</td><td>19</td><td>20</td><td>21</td><td>22</td><td>24</td><td>24</td><td>25</td><td>26</td><td>27</td><td>28</td><td>29</td><td>30</td><td>31</td><td>32</td><td>33</td><td>34</td><td>35</td><td>36</td><td>37</td><td>38</td><td>39</td><td>40</td><td>41</td><td>42</td><td>43</td><td>44</td><td>45</td><td>46</td><td>47</td><td>48</td><td>49</td> </tr> </table>  |   |   |                 |     | 14 | 15                             | 16  | 17 | 18 | 19 | 20 | 21 | 22 | 24 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 | 32 | 33 | 34 | 35 | 36 | 37 | 38 | 39  | 40 | 41 | 42 | 43 | 44 | 45 | 46 | 47 | 48 | 49 |
| 14  | 15  | 16  | 17              | 18  | 19 | 20                             | 21  | 22 | 24 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 | 32 | 33 | 34 | 35 | 36 | 37 | 38 | 39 | 40 | 41 | 42 | 43 | 44  | 45 | 46 | 47 | 48 | 49 |    |    |    |    |    |
| For DMR-QA Study 23, conducted in 2003, the permittee:  |   |   |                 |     |    |                                |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |   |    |    |    |    |    |    |    |    |    |    |
| Received Samples:   | YES   | NO  | Submitted Data: | YES | NO | Received a Report in Response: | YES   | NO |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |   |    |    |    |    |    |    |    |    |    |    |
|   |   |   |                 |     |    |                                |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |   |    |    |    |    |    |    |    |    |    |    |
|   | 50  | 51  |                 | 52  | 53 |                                | 54  | 55 |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |   |    |    |    |    |    |    |    |    |    |    |
| <b>Certification by Permit Holder or Authorized Representative</b><br>(as per 40 CFR Part 122.22 - see instructions.)<br><i>I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. Each reported value was produced from a single analytical run using the analytical system that routinely performs these analyses to produce compliance monitoring data required under our National Pollutant Discharge Elimination System (NPDES) permit. Neither I nor any of my subordinates compared our results with results from independent analyses conducted by us or any other laboratory before we reported our results to the USEPA. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.</i> |   |   |                 |     |    |                                |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |   |    |    |    |    |    |    |    |    |    |    |
| Name and Title of Certifying Official (Type or Print)   |   |   | Signature       |     |    | Date Signed                    |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |   |    |    |    |    |    |    |    |    |    |    |
| Address of Certifying Official (if different from Permittee address above.)   |   |   |                 |     |    | Telephone Number               |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |   |    |    |    |    |    |    |    |    |    |    |



United States Environmental Protection Agency  
DMR-QA Study 24  
Laboratory Performance Evaluation  
(These data are collected under the authority of the Federal Water Pollution Control Act.)

**Paperwork Reduction Act Notice**

Public reporting burden for this collection of information is estimated to average 4.37 hours per respondent. The estimate is based on conduction of an average of eleven analyses per responding permittee (the most frequently reported analyses are chemical). The estimate includes time for reading instructions, preparation of the performance samples, analyses, gathering, and reporting of the information. Send comments regarding the Agency's need for this information, the accuracy of the provided burden estimates, and any suggested methods for minimizing respondent burden, including through the use of automated collection techniques to Director, OPPE Regulatory Information Division, U.S. Environmental Protection Agency (2137), 401 M Street, SW, Washington, DC 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, 725 17th St., NW, Washington, DC 20503, Attn.: Desk Officer for EPA. Include the EPA ICR number (EPA # 244.06) and the OMB number (2080-0021) in any correspondence.

**Checklist for the NPDES Permittee Data Report Form**

Enter your NPDES permit number at the top of pages 1 and 3, and where indicated on each laboratory data sheet you submit for evaluation. Also fill in other Permittee information on page 1.

You must fill in the 2-digit **permit extension** field at the top of page 1, if there is an extension for your permit code. If you have one, the extension will appear next to your permit code in the address box on page 1; for example: "NPDES Permittee MA0102451-**01**." If there is no extension, leave this field blank.

➤ Identify each of your laboratories on pages 3 and 4, including their USEPA Labcode. (NOTE: The USEPA labcode of the laboratory that produced the data must also appear next to each quantity reported on the data sheets.)

➤ Make copies of these four cover pages. Then attach a copy of these pages to the data sheet received from each laboratory, to create a complete Permittee data package. Submit each of these Permittee Data Packages to the provider who supplied the samples which were analyzed. **You are responsible for submitting data** to the various providers to meet your DMR-QA Study 24 reporting requirements.

☐ Sign and date the certification statement on page 1.

☐ Only use these Permittee cover pages along with the data sheet supplied by each laboratory to report DMR-QA Study 24 data.

➤ Submit the Permittee Data Packages to the providers **no later than September 3, 2004**.

➤ Submit a copy of the data package to your state or Regional NPDES Regulatory Authority.

EPA-420 (Cin), Rev. 04-00. Previous editions are obsolete.



**United States Environmental Protection Agency**  
**DMR-QA Study 24**  
**Laboratory Performance Evaluation**  
 (These data are collected under the authority of Federal Water Pollution Control Act.)

**NPDES Permit Number**

|  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|
|  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|

**Identification of All CHEM & TOX Laboratories who did Analyses for this Permit**  
 Permit Number:

|          |          |
|----------|----------|
| <u>N</u> | <u>2</u> |
| <u>1</u> | <u>2</u> |

| Name      | Address   | Lab Code<br>assigned by USEPA  | Lab Analysis-<br>Put an 'X' in all<br>that apply: |           | Lab Type - choose one:<br><br>F = Federal    S = State<br>G = Local Gov.<br>C=Commercial<br>I = Industrial   O = Other |           |  |  |  |  |           |           |           |           |           |           |           |  |   |  |  |           |           |  |  |  |  |  |           |  |
|-----------|-----------|--|---|-----------|--|-----------|--|--|--|--|-----------|-----------|-----------|-----------|-----------|-----------|-----------|--|---|--|--|-----------|-----------|--|--|--|--|--|-----------|--|
|           |           |  | Chem  | Tox       |  |           |  |  |  |  |           |           |           |           |           |           |           |  |   |  |  |           |           |  |  |  |  |  |           |  |
|           |           | <table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td><u>3</u></td><td><u>4</u></td><td><u>5</u></td><td><u>6</u></td><td><u>7</u></td><td><u>8</u></td><td><u>9</u></td><td></td> </tr> </table>        |   |           |  |           |  |  |  |  | <u>3</u>  | <u>4</u>  | <u>5</u>  | <u>6</u>  | <u>7</u>  | <u>8</u>  | <u>9</u>  |  | <table border="1"> <tr> <td></td><td></td> </tr> <tr> <td><u>10</u></td><td><u>11</u></td> </tr> </table> |  |  | <u>10</u> | <u>11</u> | <table border="1"> <tr> <td></td><td></td><td></td> </tr> <tr> <td></td><td><u>12</u></td><td></td> </tr> </table> |  |  |  |  | <u>12</u> |  |
|           |           |  |   |           |  |           |  |  |  |  |           |           |           |           |           |           |           |  |   |  |  |           |           |  |  |  |  |  |           |  |
| <u>3</u>  | <u>4</u>  | <u>5</u>   | <u>6</u>  | <u>7</u>  | <u>8</u>   | <u>9</u>  |  |  |  |  |           |           |           |           |           |           |           |  |   |  |  |           |           |  |  |  |  |  |           |  |
|           |           |  |   |           |  |           |  |  |  |  |           |           |           |           |           |           |           |  |   |  |  |           |           |  |  |  |  |  |           |  |
| <u>10</u> | <u>11</u> |  |   |           |  |           |  |  |  |  |           |           |           |           |           |           |           |  |   |  |  |           |           |  |  |  |  |  |           |  |
|           |           |  |   |           |  |           |  |  |  |  |           |           |           |           |           |           |           |  |   |  |  |           |           |  |  |  |  |  |           |  |
|           | <u>12</u> |  |   |           |  |           |  |  |  |  |           |           |           |           |           |           |           |  |   |  |  |           |           |  |  |  |  |  |           |  |
|           |           | <table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td><u>13</u></td><td><u>14</u></td><td><u>15</u></td><td><u>16</u></td><td><u>17</u></td><td><u>18</u></td><td><u>19</u></td><td></td> </tr> </table> |   |           |  |           |  |  |  |  | <u>13</u> | <u>14</u> | <u>15</u> | <u>16</u> | <u>17</u> | <u>18</u> | <u>19</u> |  | <table border="1"> <tr> <td></td><td></td> </tr> <tr> <td><u>20</u></td><td><u>22</u></td> </tr> </table> |  |  | <u>20</u> | <u>22</u> | <table border="1"> <tr> <td></td><td></td><td></td> </tr> <tr> <td></td><td><u>22</u></td><td></td> </tr> </table> |  |  |  |  | <u>22</u> |  |
|           |           |  |   |           |  |           |  |  |  |  |           |           |           |           |           |           |           |  |   |  |  |           |           |  |  |  |  |  |           |  |
| <u>13</u> | <u>14</u> | <u>15</u>  | <u>16</u>   | <u>17</u> | <u>18</u>  | <u>19</u> |  |  |  |  |           |           |           |           |           |           |           |  |   |  |  |           |           |  |  |  |  |  |           |  |
|           |           |  |   |           |  |           |  |  |  |  |           |           |           |           |           |           |           |  |   |  |  |           |           |  |  |  |  |  |           |  |
| <u>20</u> | <u>22</u> |  |   |           |  |           |  |  |  |  |           |           |           |           |           |           |           |  |   |  |  |           |           |  |  |  |  |  |           |  |
|           |           |  |   |           |  |           |  |  |  |  |           |           |           |           |           |           |           |  |   |  |  |           |           |  |  |  |  |  |           |  |
|           | <u>22</u> |  |   |           |  |           |  |  |  |  |           |           |           |           |           |           |           |  |   |  |  |           |           |  |  |  |  |  |           |  |
|           |           | <table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td><u>24</u></td><td><u>24</u></td><td><u>25</u></td><td><u>26</u></td><td><u>27</u></td><td><u>28</u></td><td><u>29</u></td><td></td> </tr> </table> |   |           |  |           |  |  |  |  | <u>24</u> | <u>24</u> | <u>25</u> | <u>26</u> | <u>27</u> | <u>28</u> | <u>29</u> |  | <table border="1"> <tr> <td></td><td></td> </tr> <tr> <td><u>30</u></td><td><u>31</u></td> </tr> </table> |  |  | <u>30</u> | <u>31</u> | <table border="1"> <tr> <td></td><td></td><td></td> </tr> <tr> <td></td><td><u>32</u></td><td></td> </tr> </table> |  |  |  |  | <u>32</u> |  |
|           |           |  |   |           |  |           |  |  |  |  |           |           |           |           |           |           |           |  |   |  |  |           |           |  |  |  |  |  |           |  |
| <u>24</u> | <u>24</u> | <u>25</u>  | <u>26</u>   | <u>27</u> | <u>28</u>  | <u>29</u> |  |  |  |  |           |           |           |           |           |           |           |  |   |  |  |           |           |  |  |  |  |  |           |  |
|           |           |  |   |           |  |           |  |  |  |  |           |           |           |           |           |           |           |  |   |  |  |           |           |  |  |  |  |  |           |  |
| <u>30</u> | <u>31</u> |  |   |           |  |           |  |  |  |  |           |           |           |           |           |           |           |  |   |  |  |           |           |  |  |  |  |  |           |  |
|           |           |  |   |           |  |           |  |  |  |  |           |           |           |           |           |           |           |  |   |  |  |           |           |  |  |  |  |  |           |  |
|           | <u>32</u> |  |   |           |  |           |  |  |  |  |           |           |           |           |           |           |           |  |   |  |  |           |           |  |  |  |  |  |           |  |
|           |           | <table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td><u>33</u></td><td><u>34</u></td><td><u>35</u></td><td><u>36</u></td><td><u>37</u></td><td><u>38</u></td><td><u>39</u></td><td></td> </tr> </table> |   |           |  |           |  |  |  |  | <u>33</u> | <u>34</u> | <u>35</u> | <u>36</u> | <u>37</u> | <u>38</u> | <u>39</u> |  | <table border="1"> <tr> <td></td><td></td> </tr> <tr> <td><u>40</u></td><td><u>41</u></td> </tr> </table> |  |  | <u>40</u> | <u>41</u> | <table border="1"> <tr> <td></td><td></td><td></td> </tr> <tr> <td></td><td><u>42</u></td><td></td> </tr> </table> |  |  |  |  | <u>42</u> |  |
|           |           |  |   |           |  |           |  |  |  |  |           |           |           |           |           |           |           |  |   |  |  |           |           |  |  |  |  |  |           |  |
| <u>33</u> | <u>34</u> | <u>35</u>  | <u>36</u>   | <u>37</u> | <u>38</u>  | <u>39</u> |  |  |  |  |           |           |           |           |           |           |           |  |   |  |  |           |           |  |  |  |  |  |           |  |
|           |           |  |   |           |  |           |  |  |  |  |           |           |           |           |           |           |           |  |   |  |  |           |           |  |  |  |  |  |           |  |
| <u>40</u> | <u>41</u> |  |   |           |  |           |  |  |  |  |           |           |           |           |           |           |           |  |   |  |  |           |           |  |  |  |  |  |           |  |
|           |           |  |   |           |  |           |  |  |  |  |           |           |           |           |           |           |           |  |   |  |  |           |           |  |  |  |  |  |           |  |
|           | <u>42</u> |  |   |           |  |           |  |  |  |  |           |           |           |           |           |           |           |  |   |  |  |           |           |  |  |  |  |  |           |  |



**United States Environmental Protection Agency**  
**DMR-QA Study 24**  
**Laboratory Performance Evaluation**  
 (These data are collected under the authority of Federal Water Pollution Control Act.)

**Identification of All CHEM & TOX Laboratories who did Analyses for this Permit**  
 (continued from previous page)

| Name | Address | Labcode<br>assigned by USEPA   | Lab Analysis-                 |           | Lab Type - choose one:<br><br>F = Federal    S = State<br>G = Local Gov. C=Commercial<br>I = Industrial   O = Other |
|------|---------|--|-------------------------------|-----------|---|
|      |         |  | Put an 'X' in all that apply: |           |   |
|      |         |  | Chem                          | Tox       |   |
|      |         | <div style="display: flex; justify-content: space-between; padding: 2px;"> <span><u>43</u></span> <span><u>44</u></span> <span><u>45</u></span> <span><u>46</u></span> <span><u>47</u></span> <span><u>48</u></span> <span><u>49</u></span> </div> | <u>50</u>                     | <u>51</u> | <u>52</u>   |
|      |         | <div style="display: flex; justify-content: space-between; padding: 2px;"> <span><u>53</u></span> <span><u>54</u></span> <span><u>55</u></span> <span><u>56</u></span> <span><u>57</u></span> <span><u>58</u></span> <span><u>59</u></span> </div> | <u>60</u>                     | <u>61</u> | <u>62</u>   |
|      |         | <div style="display: flex; justify-content: space-between; padding: 2px;"> <span><u>63</u></span> <span><u>64</u></span> <span><u>65</u></span> <span><u>66</u></span> <span><u>67</u></span> <span><u>68</u></span> <span><u>69</u></span> </div> | <u>70</u>                     | <u>71</u> | <u>72</u>   |

420 (Cin), Rev. 04-00. Previous editions are obsolete.